12/27/200

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PART B - FEE(S) TRANSMITTAL

INSTRUCTIONS: This f appropriate, All further coindicated unless corrected maintenance fee notification	orm should be used for tra- below or directed otherwise.	insmitting the ISS Patent, advance of the in Block I, by	OF UE FEE and orders and no (a) specifying	Fax	(703) 746-4000	E FEE or Patents ginia 22313-1450 sired). Blocks 1 through 5 will be mailed to the curren (; and/or (b) indicating a sep	should be completed where t correspondence address as arate "FEE ADDRESS" for
005179	10/20/2004 TO 10/20/2004 ERS AND ADAMS TO NM 871256927				Ce	rtificate of Mailing on True	for domestic mailings of the for any other accompanying ant or formal drawing, must smission g deposited with the United st class mail in an envelope a above, or being facsimile date indicated below.
4 JADDO2 00000061 1 1400.00 DA 4 300.00 DA					Rober Rober	TO (703) 746-4000, on the days	
1 300.00 14					12	-23-2004	(Dato)
APPLICATION NO.	FILING DATE		FIRST NAME	D INVEN	TOR	ATTORNEY DOCKET NO.	CONFIRMATION NO.
10/056,736	01/24/2002	Tom Kliffsner				SD6053-US2	1172
APPLN. TYPE	UEL CELL AND MEMBR.	ANE Tissue 6	IRR	PII	BLICATION FRB	TOTAL FEE(S) DUE	
nonprovisional	NO	\$1370			\$300	\$1670	01/21/2005
EXAMINER		ART UNIT				1	01/21/2005
KALAFUT, STEPHEN J		1745			ASS-SUBCLASS 429-034000		
1. Change of correspondence CFR 1.363). Change of correspond Address form PTO/SB/1: "Fee Address" indicate PTO/SB/47; Rev 03-02 of Number is required.	2. For printing on the patent front page, list (1) the names of up to 3 registered patent attorneys or agents OR, alternatively, (2) the name of a single firm (having as a member a registered attorney or agent) and the names of up to 2 registered patent attorneys or agents. If no name is listed, no name will be printed.						
	RESIDENCE DATA TO B						~
PLEASE NOTE: Unless recordation as set forth in	an assignes is identified be 37 CFR 3.11. Completion	low, no assignee of this form is NO	data will app La substitute	ear on the for filing	e patent. If an assigns an assignment.	e is identified below, the do	ocument has been filed for
(A) NAME OF ASSIGNI	SE .	(B			and STATE OR COU		
Sandi	a Corporat	ion				e, NewMexi	co, USA
Please check the appropriate	assignee category or categor	ries (will not be pri	inted on the p	atent):	Individual Con	poration or other private gro	up entity Government
a. The following fee(s) are	enclosed:	4b.	. Payment of	Fee(s):			
Issue Fee A check in the amount of the see(s) is enclosed. Publication Fee (No small entity discount permitted) Payment by credit card. Form PTO-2038 is attached.							
Advance Order - # of	Payment by credit card. Form P'10-2038 is attached.						
	The Director is hereby authorized by charge the required fee(s), or credit any overpayment, to Deposit Account Number 19-0131 (enclose an extra copy of this form).						
 Change in Entity Status (a. Applicant claims SN 	(from status indicated above) MALL ENTITY status, See 3					FNTITY status Son 27 CE	·

The Director of the USPTO is requested to apply the Issue Fee and Publication Fee (if any) or to re-apply any previously paid issue fee to the application identified above.

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Authorized Signature Robert D. Watson	Date 12-23-2004
Typed or printed name Robert D. Watson	Registration No. 45,604

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